RSTNCOVID Burns Survey

Please complete the survey below.

Thank you!

Survey purpose:

The COVID-19 pandemic has led to changes in the management of patients with burn injuries and in the provision of burns services. The aim of this survey is to identify areas of change in each burns unit/centre and any potential areas for improvement in the future.

What happens next:

This survey is brief and will only take about 8 minutes to complete. We would like for you to fill this survey with other members of your burns MDT during your next MDT meeting.

Data protection statement:

We will store your name and email address for the purposes of contacting you about the #RSTNCOVID survey and service evaluation. Your data will not be shared or used for other purposes. At the end of the study, your details will be erased. You can withdraw at any point by emailing rstncovid@gmail.com. See the RSTN webpage for the privacy policy.

Your information	
Your full name	
	(First name, initials and surname as would appear in a journal article)
Email address	
Name of hospital	
	
Name of NHS trust	
Burns Facility/ Burns Unit/ Burns Centre	
I would like to be recognised as a collaborator	
List members of Burns MDT that are present for the survey and names	
sarrey and names	(e.g. therapist, psychologist, burns nurse, surgeon)



Changes in burns management: Referrals	
Were burns that you would previously have brought to the unit managed locally with advice? e.g. at the GP practice, referring hospital etc	○ Yes ○ No
Which burns did you manage in this way?	
Did you make changes to the way referrals were made to your service during the COVID-19 pandemic?	○ Yes ○ No
If yes, how?	



Changes in burns management: Staff deployment and Staffing levels		
Were staff from your team redeployed as part of the COVID-19 response?	○ Yes ○ No	
Which team members were redeployed?	 □ Doctors □ Nurses □ Physiotherapists/ Occupational Therapists □ Dieticians □ Psychologists □ Speech and language therapists □ Other 	
Where were these team members redeployed to?		
Please specify grade of doctors redeployed:	☐ F1-2☐ CT1-2☐ ST3-8☐ Consultant	
Please specify banding of nurses redeployed:	☐ HCA ☐ Band 5 and below ☐ Band 6 and above	
If other, please specify		
% of doctors redeployed		
% of nurses redeployed		
% of physiotherapists/ occupation therapists redeployed		
% of dieticians redeployed		
% of psychologists redeployed		
% of speech and language therapists redeployed		
% of other redeployed		
Did staff redeployment impact your burns service provision?	○ Yes ○ No	
If yes, how?		
	-	



Did staff sickness or isolation impact your burns service provision?	○ Yes ○ No
If yes, how?	
What percentage of your staff were off sick or isolating due to COVID-19?	
Did staff shielding impact your burns service provision?	○ Yes ○ No
If yes, how?	
What percentage of your staff were off sick or isolating due to COVID-19?	

Changes in burns management: 110/HDO availability	у
Was there a change in the ITU/HDU avaliability for ADULT burns patients?	
Did this affect your ability to accept referrals?	○ Yes ○ No
Did this affect HDU/ITU support available post-operatively?	○ Yes ○ No
Did this lead to changes in patient management?	○ Yes ○ No
If yes, how?	
Was there a change in ITU/HDU availability for PAEDIATRIC burns patients?	○ Yes ○ No
Did this affect your ability to accept referrals?	○ Yes ○ No
Did this affect HDU/ITU support available post-operatively?	○ Yes ○ No
Did this lead to changes in patient management?	○ Yes ○ No
If yes, how?	
How did this affect the service you delivered and management decisions?	



Changes in burns management: Access to theatres	
Where do you normally operate on burns cases?	Dedicated burns theatreMain theatresOther (free text)
If other, please specify	
Do you normally have dedicated theatre lists for acute burns cases?	○ Yes ○ No
If yes, how were these affected by COVID-19:	 No change Reduced number of dedicated theatre lists No dedicated lists; patients on CEPOD lists Other
If other, please specify	
What impact did this have on your operative capacity?	

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Changes in burns management: Discharge	
Did COVID affect the social services input you could provide for patients?	○ Yes ○ No
If yes, how?	
Did you face any difficulties discharging patients during the lockdown period?	○ Yes ○ No
If yes, what were these issues?	
	(e.g. social services, therapists, nursing)



Changes in burns management: Outpatient clinics	
Have you continued to deliver elective outpatient clinics?	○ Yes ○ No
How have these been performed?	☐ Face to face ☐ Telephone ☐ Video calling ☐ Other
Other format of elective outpatient clinic	
Have you performed any elective burns surgery?	○ Yes ○ No
Have you been able to offer a laser service?	○ Yes○ No○ N/A (not previously offered prior to COVID)
What impact has this had on your consultations?	
Have there been any changes to your scar therapy service during the COVID-19 pandemic?	○ Yes ○ No
If yes, what were the changes?	
Have you changed the way patients are managed in the dressing clinic?	○ Yes ○ No
If yes, how?	 ☐ Fewer follow-up appointments ☐ Increased change of dressings at home (by patient/GP/district nurse) ☐ Increased use of outreach services for vulnerable patients ☐ Use of remote appointments (telephone) ☐ Use of remote appointments (video calling) ☐ Use of emails/photographs to monitor wounds ☐ Other
If other, please specify	
Have you delivered psychology sessions during the pandemic?	○ Yes ○ No
If no, why?	
Has this been remote or in person?	○ Remote ○ In person
If remote, has this affected your ability to deliver your sessions?	○ Yes ○ No

If yes, how?	
What impact do you feel the pandemic has had on the psychology service you deliver?	



Change in burns management: Use of telemedicine	
Has your use of Telemedicine changed during the pandemic?	○ Increased use○ No change○ Decreased use
What methods of telemedicine have you used?	 □ Telephone calls to patients □ Video calls to patients □ Email contact to patients □ Other
If other, please specify:	
What has telemedicine been used for?	☐ GP referrals ☐ Patient advise ☐ Patient follow-up ☐ Outpatient clinics/consultations ☐ Other
Other use of telemedicine	
How has telemedicine changed the way that you deliver care?	

Changes in burns management: Supply chain	
Did you have any interruptions to your supply chain of equipment/dressings/creams/medications during COVID-19?	
What did you have shortages of and how did this affect burns management by your service?	
Has your department experienced shortages of PPE? [click those that apply]	 No shortage Surgical Masks FFP3 respirators Visors Gloves Aprons Surgical gowns Scrubs Other
Other shortages of PPE	
Does the department CURRENTLY have sufficient PPE to work safely?	○ Yes, not limiting service provision○ Yes, with reduced service provision○ No
How have the shortages of PPE impacted your department?	
Were you given PPE training?	○ Yes ○ No
Did you feel safe using the PPE you were provided with?	○ Yes ○ No
Did wearing PPE affect your work in theatre?	○ Yes ○ No
If yes, how?	☐ Communication difficulties☐ Duration able to operate☐ Staffing☐ Other
Other way wearing PPE affected your work in theatre	
How have you overcome this?	



Changes in burns management: COVID adaptations /	improvements
Has COVID-19 led to any improvements or adaptations in burn care in your centre?	
Which of these changes would you like to adopt in the future?	



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